

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants:	LIAO et al.	Docket No.:	372465-01801
Serial No.:	10/784,113	Art Unit:	2676
Filed:	February 20, 2004	Examiner:	Cachera, Antonio A
For:	APPROXIMATION OF LEVEL OF Confirm. No. 5256 DETAIL CALCULATION IN CUBIC MAPPING WITHOUT ATTRIBUTE DELTA FUNCTION		

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**TRANSMITTAL FOR REQUEST FOR RECONSIDERATION &
AMENDMENT UNDER 37 CFR 1.111**

I. ENCLOSURES

Transmitted herewith are the following documents for the above-referenced application:

- ☒ 11 Page Request for Reconsideration & Amendment Under 37 CFR 1.111; and
- ☒ Request for Extension of Time (3 months).

II. STATUS

- ☒ Applicant is a large entity.

III. EXTENSION OF TIME

Applicant petitions for an extension of time under 37 CFR 1.136 for the total number of months checked below:

	<u>Extension (months)</u>	<u>Large Entity</u>	<u>Small Entity</u>
<input type="checkbox"/>	one month	\$ 120.00	\$ 60.00
<input type="checkbox"/>	two months	\$ 450.00	\$225.00
<input checked="" type="checkbox"/>	three months	\$1,020.00	\$510.00

Fee \$1,020.00

- ☒ If an additional extension of time is required please consider this a petition therefore.
- ☐ Applicant believes that no extension of time is required. However, this conditional petition is hereby made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

CERTIFICATE OF ELECTRONIC TRANSMISSION (EFS)

CERTIFICATE OF TRANSMISSION BY ELECTRONIC FILING SYSTEM (EFS-WEB): I certify that I am working under the authority of the certificate holder that this correspondence (and all attachments listed) is being electronically filed with the U.S. Patent & Trademark Office, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:

Date: September 18, 2006

Yvette Yurralde-Owen

IV. FEE FOR CLAIMS

The fee for claims (37 CFR 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee		Rate	Addit. Fee
Total *	20	Minus *0*	20	0	x25=	\$0	x50=	\$0
Indep. *	2	Minus *0*	3	0	x100=	\$0	x200=	\$0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+180=	\$0		x360=	\$0
				TOTAL ADDIT. FEE	\$0	OR	TOTAL ADDIT. FEE	\$0

- ☒ No additional fee for claims required.
☐ Total additional fee for claims required \$_____.

V. FEE PAYMENT


- ☒ Please charge Deposit Account No. 50-2778 the sum of \$1,020 for the three (3) month extension of time fee.

VI. FEE DEFICIENCY

- ☒ The Commissioner is authorized to charge any required fees, additional fees, or credit any overpayment to Deposit Account 50-2778.

Respectfully submitted,

DECHERT LLP


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Dated: September 18, 2006

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